

## STATEMENT OF THIRD PARTY INSPECTION

Project Address		Permit Number
· · · · · · · · · · · · · · · · · · ·	e Virginia Uniform	ed as a condition for required inspections in Statewide Building Code. This statement Γhird Party Inspection.
Signature of Permit Applicant	Date	
Name of Third Party Inspector	Qualifications	
• 0 0		nd omissions insurance for any errors or inspection duties as outlined herein.
Signature of Third Party Inspector	Date	
Code Official's Acceptance	Date	
_		
substantially in compliance with red	quirements in the	leted. All work required to be inspected is Virginia Uniform Statewide Building Code nts. All discrepancies that were outstanding
Respectfully submitted,		
Signature of Third Party Inspector		